

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	kw	68904	1/21/00
O.I.P.E. CLASSIFIER			10 2-8-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			1/16/00 2/17/00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) ... Canceled A ..... Appeal  
 -+ ..... Restricted O ..... Objected

Claim	Final Original	Date
1	1	1/8/00
2	1	1/8/00
3	1	1/8/00
4	1	1/8/00
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Claim	Final Original	Date
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If more than 150 claims or 10 actions  
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